09/75/029

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09751021

CLAIMS AS FILED - PART I SMALL ENTITY O											OTHER	THAN
		-	(Column 1)		(Column 2)			TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			·					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			ქვ minus 20=		. 3			X\$ 9=		OR	3X\$18=	54.
INDEPENDENT CLAIMS			3 minus 3 =					X40=		OR	You	
M	JLTIPLE DEPE	NDENT CLAIM P				+135=		OR				
• 11	the difference	in column 1 is	r "0" in c	olumn 2		TOTAL		OR		1011		
CLAIMS AS AMENDED - PART II								·	Щ	IOU	OTHER	764.
	en en efektivel. En en efektivel		SMALL	ENTITY	OR	SMALL						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	.23	Minus	2	3	=		X\$ 9=	,	OR	X\$18=	,
AME	Independent	· 3	Minus	***	3 3	L=		X40=		OR	X80=	1
ندون دون	<b>建设建筑</b>	ENTATION OF MI					<b>!</b>	+135=	: /	OR	+270=/	
											/	
OR ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AT A		CLAIMS		HIGH		(Column 3)	1 -					
AMENDMENT B		REMAINING AFTER AMENDMENT	•	NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	2	3	=		X\$ 9=	/	OR	X\$18=	
Ž,	Independent	· 3	Minus		3	=/		X40=		OR	X80=	
ij.	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		ا ا		-/-	Οħ		•
i k	de Marie de la compansión	A State of the Control of the					L	+135=	`	OR	+270=	
	and and an articles and a state of the state	TRENGEN PART RECORDS OF THE		••		•	. Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	•
		(Column 1)		(Colun	nn 2)	(Column 3)						
		CLAIMS		HIGH			Г	<del>-                                    </del>	ADDI	1		4001
Ĕ		REMAINING AFTER		NUME PREVIO		PRESENT EXTRA		RATE .	ADDI- TIONAL	.	RATE	ADDI- TIONAL
<b>5</b>		AMENDMENT		PAID		EXTRA		11/21/2	FEE		HAIE	FEE
Ď,	Total	. 22	Minus	2	3	= /		X\$ 9=	/		X\$18=	
MENDMENTC	independent.	3	Minus	***	3	= /	-		-/-	OR		
<b>X</b>	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	PENDENT	CLAIM		L	X40=		OR	X80=	
+135= OR +276=												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	
and the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE												
7	her Highest Num	ber Previously Paid	For (Total or	Independe	nt) is the	highest number	r foun	d in the appr	ropriate box	in col	ımn 1.	
V 67	24.00 Mg	•										

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